

SITE DATA:

1. OWNER/DEVELOPER

2. ENGINEER

3. TAX MAP

4. ZONING

ZONE

CURRENT USE

PROPOSED USE

OVERLAY DISTRICT

5. SITE AREA

TOTAL ACREAGE

OPEN SPACE REQUIRED

OPEN SPACE PROVIDED

BUILDING AREA

BUILDING HEIGHT REQUIRED

BUILDING HEIGHT PROVIDED

FLOOR AREA RATIO

6. SETBACKS

FRONT

SIDE

REAR

7. UTILITIES

COUNTY WATER

COUNTY SEWER

WELL

SEPTIC

OTHER

	YES	NO
COUNTY WATER		
COUNTY SEWER		
WELL		
SEPTIC		
OTHER		

8. PARKING

SPACES REQUIRED

SPACES PROVIDED

HANDICAP SPACES REQUIRED

HANDICAP SPACES PROVIDED

LOADING SPACES REQUIRED

LOADING SPACES PROVIDED

NOTICE TO CONTRACTORS AND OWNERS:

- CERTIFICATION OF STORM SEWERS, STORMWATER CONVEYANCE CHANNELS, STORMWATER MANAGEMENT PONDS, BIORETENTION STRUCTURES, ETC. SHALL BE PROVIDED TO STAFFORD COUNTY PRIOR TO RELEASE OF RELATED SECURITIES. THE CERTIFICATION SHALL BE IN ACCORDANCE WITH STAFFORD COUNTY'S STORMWATER MANAGEMENT DESIGN MANUAL.
- "PRIOR TO STARTING CONSTRUCTION" THE CONTRACTOR MUST CONSULT WITH THE CERTIFYING PROFESSIONALS (INCLUDING GEOTECHNICAL ENGINEERS) WHO WILL PROVIDE THE CERTIFICATIONS AND MUST BE ACCOMPANIED BY AS-BUILT PLANS AND, WHERE APPLICABLE, A GEOTECHNICAL INSPECTIONS REPORT.

FIRE DEPARTMENT NOTES:

- ALL FIRE HYDRANTS, STREET SIGNS, & FIRE LANE MARKINGS/SIGNS MUST BE PROVIDED PRIOR TO OCCUPANCY OF THE FIRST BUILDING OR DWELLING UNIT.
- FIRE HYDRANTS AND & FIRE DEPARTMENT ACCESS MUST BE AVAILABLE & OPERATIONAL PRIOR TO ANY BUILDING CONSTRUCTION.
- OPEN BURNING IS NOT PERMITTED UNLESS A VALID PERMIT & PRIOR APPROVAL IS OBTAINED FROM THE FIRE MARSHAL'S OFFICE (540.858.7200).
- THE BUILDING ADDRESS MUST BE POSTED AT THE SITE PRIOR TO ANY BUILDING CONSTRUCTION. THE ADDRESS MUST BE AT LEAST 6" IN HEIGHT ON A CONTRASTING BACKGROUND & VISIBLE FROM THE EXISTING STREET.
- WHERE A BUILDING IS EQUIPPED WITH A FIRE ALARM SYSTEM, A RAPID ACCESS "KNOX BOX" KEY BOX IS REQUIRED AT THE MAIN ENTRANCE (OR SPRINKLER/ALARM ROOM WHERE NUMEROUS ENTRANCES EXIST). THE BOX SHALL BE SECURELY MOUNTED IN A VISIBLE LOCATION ABOUT 4 FT. FROM GRADE. THE CONTENTS OF THE BOX MUST INCLUDE THE FOLLOWING ITEMS AND LABELED KEYS: 1) MASTER KEY, 2) FIRE ALARM KEYS, 3) ELEVATOR KEYS FOR FIREFIGHTER OPERATION, 4) ANY OTHER KEYS TO EMERGENCY EQUIPMENT AREAS OR GATES, 5) BUILDING REPRESENTATIVE EMERGENCY CONTACT INFORMATION.

PRO RATA CALCULATIONS:

WATER: \$0.00 x 0 D.U. x ___ G.P.D. = \$0.00 (NAME OF PRESSURE ZONE WITH A RATE OF \$0.00/GAL)
 SEWER: \$0.00 x 0 D.U. x ___ G.P.D. = \$0.00 (NAME OF SEWER SHED WITH A RATE OF \$0.00/GAL)
 TOTAL = \$0.00

PRO RATA FEES ARE IN ADDITION TO WATER AND SEWER AVAILABILITY FEES.

NOTE:

THE APPROVAL OF THIS PLAN DOES NOT GUARANTEE THE SEWER AND/OR WATER CAPACITY IS AVAILABLE BY A CERTAIN DATE. CAPACITY FOR THIS PROJECT, IF AND WHEN AVAILABLE, WILL NOT BE RESERVED UNTIL ALL CONSTRUCTION, INSPECTION, AVAILABILITY AND PRO RATA FEES ARE PAID AND THE PROPERTY IS CONNECTED TO THE PUBLIC SEWER AND/OR WATER SYSTEM. RESERVATION OF CAPACITY WILL BE SUBJECT TO THE COUNTY'S POLICE POWERS TO RESTRICT USE WHEN REQUIRED BY THE PUBLIC HEALTH, SAFETY OR WELFARE.

THIS PROJECT IS IN THE ___ PRESSURE ZONE. ANY STRUCTURE WHICH HAS A FIRST FLOOR ELEVATION OF LESS THAN ___ FEET WILL REQUIRE A PRESSURE REDUCING VALVE ANY STRUCTURE WHICH HAS A FIRST FLOOR ELEVATION ABOVE ___ WILL REQUIRE A BOOSTER PUMP.

CALL MISS UTILITY 811:

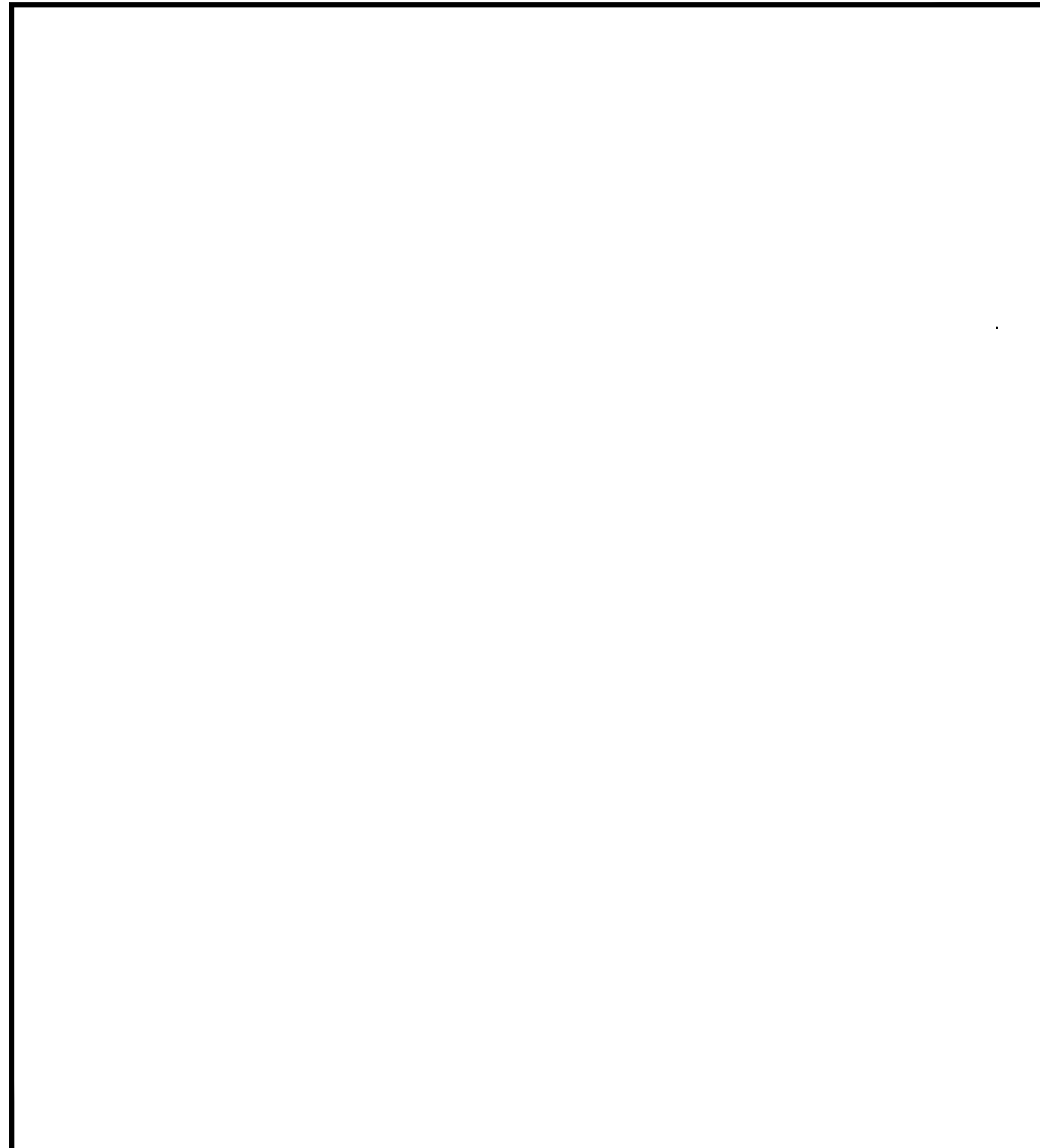
CALL MISS UTILITY AT 811 AT LEAST 48 HOURS BEFORE THE START OF ANY EXCAVATION WORK.



PROJECT NAME

AP NUMBER

MAGISTERIAL DISTRICT
STAFFORD COUNTY, VIRGINIA



VICINITY MAP

SCALE: 1"=2000'
1 MILE RADIUS

ENGINEER'S CERTIFICATE

TAX MAP ___ PARCEL ___ HAVING BEEN CONVEYED TO NAME OF OWNER BY DEED DATED ___ AND RECORDED IN THE CLERK'S OFFICE OF THE CIRCUIT COURT OF STAFFORD COUNTY, VIRGINIA AT INSTRUMENT _____.

ENGINEER NAME _____ DATE _____

THE RESPONSIBLE LAND DISTURBER FOR THIS PROJECT IS _____.

NOTE: NAME OF ENGINEER WILL BE REPLACED AS THE RESPONSIBLE LAND DISTURBER AT SUCH TIME AS A CONTRACTOR IS SELECTED AND PRIOR TO THE ISSUANCE OF THE LAND DISTURBANCE PERMIT.

SHEET	DESCRIPTION
1.0	COVER SHEET
2.0	(SP) NOTES & DETAILS
3.0	(SP) PROFFERS, CUP CONDITIONS & IMPLEMENTATION
4.0	(SP) EXISTING CONDITION
5.0	(SP) OVERALL
6.0	(SP) KEY PLAN
7.0	(SP) SITE LAYOUT
8.0	(SP) GRADING PLAN
9.0	(TRANS) ROAD PROFILES
10.0	(TRANS) TYPICAL SECTIONS
11.0	(TRANS) SIGHT DISTANCE
12.0	(TRANS) ENTRANCE IMPROVEMENTS
13.0	(TRANS) TRAFFIC MANAGEMENT PLAN
14.0	(TRANS) LIGHTING PLAN
15.0	(TRANS) SIGNAGE & STRIPING PLAN
16.0	(LAND) LANDSCAPING PLAN & SCHEDULE
17.0	(LAND) LANDSCAPING DETAILS (PROFILES & STANDARDS)
18.0	(ES) EROSION & SEDIMENT CONTROL PLAN
19.0	(ES) EASEMENT PLAN
20.0	(SWM) STORM DRAIN PROFILES
21.0	(SWM) DETAILS & SPECIFICATIONS
22.0	(SWM) SOIL MAP
23.0	(SWM) STORM DRAINAGE & SWM CALCULATIONS
24.0	(SWM) DRAINAGE AREA MAP
25.0	(UTIL) WATER & SEWER EASEMENTS
26.0	(UTIL) SANITARY SEWER DESIGN
27.0	(UTIL) WATERLINE PLAN & PROFILE
28.0	(UTIL) SANITARY SEWER PLAN & PROFILE
29.0	(UTIL) UTILITIES CALCULATIONS
30.0	(UTIL) WATER-SANITARY DETAILS
31.0	(UTIL) WATER-SANITARY NOTES & WATER METER SIZING
32.0	(UTIL) IRRIGATION PLAN

ENGINEERING/SURVEY LOGO

ADDRESS _____
CITY/COUNTY _____
PHONE: _____
FAX: _____
EMAIL: _____

TITLE BLOCK

MAGISTERIAL DISTRICT
STAFFORD COUNTY, VIRGINIA

SEAL

REVISION									
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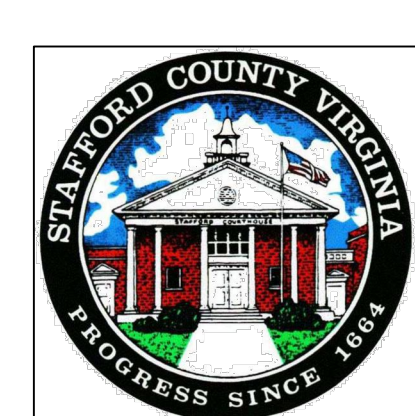
DATE									
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SHEET ___ OF ___

AP NUMBER: _____

COUNTY APPROVAL

APPROVAL BLOCK



AGENT, STAFFORD COUNTY BOARD OF SUPERVISORS

DATE _____

VDOT OFFICIAL _____ DATE _____

FIRE MARSHALL _____ DATE _____

DEPARTMENT OF UTILITIES _____ DATE _____

E&S/SWM PROGRAM ADMINISTRATOR _____ DATE _____